Sign-in Register

			CONTACT TRACING INFORMATION			I DECLARE I HAVE NOT		
DATE	**FULL NAME**	**ROLE**	**TRAVELLED TO WORK BY** (own car, bus)	**WHO DID YOU TRAVEL WITH**	**CONTACT NUMBER**	(please sign) • arrived into NZ within the past 14 days • had contact with someone with COVID-19 symptoms • have any COVID-19 symptoms	**TIME IN**	**TIME OUT**